



MATCHING GRANTS PROGRAMME

TANZANIA BUSINESS DEVELOPMENT SCHEME

(TBDS)

APPLICATION FORM - 2010

Thank you for your interest in Matching Grants Programme.

Please read the following instructions carefully before completing the Application. This will help us to assist you and your company's plans to improve your competitive position and to grow and expand.

- i) This Application Form should only be completed **after first submitting the Registration Form** and your company and proposed activity have been confirmed as eligible for grant support under TBDS.
- ii) Every Applicant should read and understand the Rules and Regulations.
- iii) Every Applicant must complete **all the sections** in this Application Form. Incomplete application may be deemed ineligible and will not be considered.
- iv) Please provide any brochure or company literature which will assist MGP to evaluate the application. Also please provide a recent photograph of your business premises and of the Processing plant or workshop.
- v) Please retain a copy of your application. Applications should normally be typed. If handwritten, please ensure all details are completely legible. If not legible an application risks being deemed incomplete and therefore ineligible.
- vi) Any approved Applications or activities which shall be deemed to have misappropriated funds or reflected any elements of dishonesty during application, implementation or reporting, shall not qualify for re-imburement of their claims. They shall be disqualified from any further support under the Program.
- vii) Please allow at least one month for the evaluation of your application.

Serial No. R...../A.....

SECTION 1: Company Data:

1.1 Name of company: _____

1.2 Name of contact person: _____

1.3 Title/Position _____

1.4 Physical Address of Business Premises:

- *Street and Plot No.* _____

- *Area and District* _____

- *Region* _____

Please provide a photograph of the business premises and of the plant or workshop.

1.5 Postal Address: _____

1.6 Telephones: Land: _____

Cell: _____

1.7 Fax: _____

1.8 E-mail: _____

1.9 Website: _____

1.10 Year of establishment: _____

1.11 Number of Certificate of Business Registration/Certificate of

Incorporation: _____

1.12 TIN Number: _____

1.13 Names and Addresses of Owners or Directors of the Company

	Name	Address P. O. Box	Tel No.
1			
2			
3			

SECTION 2: COMPANY STATUS AND OPERATIONS

2.1 Nature of the business:

PRODUCTS MANUFACTURED OR SERVICE OFFERED	
If you are a manufacturer , what products do you make?	
If you are a processor , please explain the process and describe your end product.	
Is the factory or workshop at the address indicated in 1.4 above? If not please give exact physical location of the factory / workshop.	<i>Street</i>
	<i>Plot No</i>
	<i>Area & District</i>
	<i>Region</i>
If you are a service provider , please describe in detail the service you provide.	

2.2 Operations and Sales

	2008	2009	2010 Estimate	2011 Estimate	2012 Estimate
Total Sales (Tshs or US\$).					
% Exports (if any)					
No. Employees					
Capacity Utilisation	%	%	%	%	%

2.3 Contribution of Principal Products/Services to Sales:

Product / Service	Quantity Produced (Units)	Contribution to Sales (%)

2.4 What are the major sources of:

- i) Raw materials _____
- ii) Packing Material _____

2.5 Where are the major Markets for your products?

- i) _____
- ii) _____
- iii) _____

2.6 Are you a member of any business or professional associations?

Name of Association: _____

Contact _____ Tel _____

Name of Association: _____

Contact _____ Tel _____

2.6.1 *If you are not a member of a business or professional association please provide reference of a professional business service organisation that will be able to confirm information provided (e.g. SIDO / TCCIA, Professional Accounting Firm, Lawyer)*

Name of Organisation: _____

Contact _____ Tel _____

2.7 Does the Company operate a Bank Account in the company name?

Please note that reimbursements can only be made to Company accounts.– Private or personal accounts are not acceptable

- i) Name of the Bank _____
- i) Branch Name _____

2.9 Did the Company receive any grants or assistance (e.g. sponsorship) during the past 12 months?

If yes, please list the sources, purpose and amounts of the grants including MGP. Please include any applications currently in process.

No.	Name of Grant Provider	Purpose of Grant and outcome	Amount	Date
1				
2				
3				

3.3 Briefly describe the impact which is expected in any, or all, of the following areas in the next one to two years:

Sales	
Employment	
Exports	
Competitiveness	
New Products	
Improved quality	
Improved production	
Assets	
Ownership	
Other (Please describe)	

DRAFT FOR PREVIEW ONLY

SUMMARY OF COSTS FOR THE ACTIVITIES PLANNED TO BE CARRIED OUT WITH THE SUPPORT OF THE MATCHING GRANTS PROGRAM (MGP)

To be completed by the applicant, giving detailed breakdown showing the activities and sub-activities, and the costs for each, showing clearly how each of the cost figures has been arrived at. If necessary, use a separate sheet for the detailed breakdown

(Please attach Supplier's quotations and Consultancy/Training Agreements or Terms of Reference (ToR) where applicable)

Type of Activity	Selected Service Provider	Gross Eligible Expenditure	Timing of Activity Month/Year	
			Start	Finish
	Total budget		Grant amount approved	
	Grant sought – 50%			

Use continuation sheet if necessary

APPLICANT'S SIGNATURE:

I hereby declare that the information supplied herein is, to the best of my knowledge, accurate and true.

I also confirm that I have read and understood the Rules and Regulations of MGP.

Signature of this form is also a formal declaration the company is not receiving financial support from any other source for the activities applied for.

I accept that the deliberate provision of false or misleading information will lead to the cancellation of this application and any subsequent approval.

I hereby formally apply to the Tanzania Business Development Scheme for a grant in relation to the specific activities set out above.

SIGNATURE: _____

NAME: _____

POSITION: _____

DATE: _____/_____/2010

Thank you for your interest in promoting and expanding your business in cooperation with the Tanzania Business Development Scheme.

To make sure your application can be reviewed please ensure that is fully complete, and accompanied by the correct supporting documentation including:

- 1. Copy of your Business Name Registration Certificate and/or Certificate of Business Registration and/or Certificate of Incorporation and specific licenses if required*
- 2. Copies of Business License and TIN*
- 3. Recent Photograph of your business premises and of your processing plant or workshop.*
- 4. For 2010, all programmes and activities submitted for grant support should be contained within an outline Business Plan. Guidelines for preparing the Business Plan are sent with this Application Form.*
- 5. Budgets and costs should be supported by quotations from potential service suppliers. If individual budget items are over US\$ 300 - or equivalent in Tsh - then three quotations may be required.*
- 6. For programmes or activities exceeding \$ 60,000 (i.e. grant of more than \$ 30,000), please also submit the last audited accounts of your company. If these are more than one year old, the previous year's accounts must also be submitted.*